

4 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

UNITED STATES DISTRICT COURT

for the

District of

Division

Case No.

4:20

918

(to be filled in by the Clerk's Office)

Joshua Lee Keenan

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

JUDGE PEARSON

MAG. JUDGE LIMBERT

Ohio Department of Rehabilitation and Correction

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

2020 APR 29 PM 2:21
NORTHERN DISTRICT OF OHIO
CLEVELAND

FILED

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

~~Joshua Lee Keenan~~ Joshua Lee Keenan

All other names by which
you have been known:

N-A

ID Number

A754057

Current Institution

Northeast Ohio Correctional Center

Address

2240 Hubbard Road

Youngstown

City

Ohio

State

44505

Zip Code

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (*if known*) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1

Name

Tim Sturgiss

Job or Title (*if known*)

AS/S-LT

Shield Number

N-A

Employer

Northeast Ohio Correctional Center

Address

2240 Hubbard Road

Youngstown

City

Ohio

State

44505

Zip Code

☐ Individual capacity☒ Official capacity**Defendant No. 2**

Name

Officer Odell

Job or Title (*if known*)

Correctional Officer

Shield Number

N-A

Employer

Northeast Ohio Correctional Center

Address

2240 Hubbard Road

Youngstown

City

Ohio

State

44505

Zip Code

☐ Individual capacity☒ Official capacity

Defendant No. 3

Name MR. Weaver -
 Job or Title (if known) INST. Inspector
 Shield Number N-A
 Employer Northeast Ohio Correctional Center
 Address 2240 Hubbard Road
Youngstown Ohio 44505
City State Zip Code
☐ Individual capacity ☒ Official capacity

Defendant No. 4

Name ~~MR. Philps~~ MR. Philps
 Job or Title (if known) Warden
 Shield Number N-A
 Employer Northeast Ohio Correctional Center
 Address 2240 Hubbard Road
Youngstown Ohio 44505
City State Zip Code
☐ Individual capacity ☒ Official capacity

II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):

- ☐ Federal officials (a *Bivens* claim)
☒ State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?
Right to medical services Right from the wisel blowing law
Safety and Security Violated
Right to legal services
Free from cruel and unusual punishment

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials? N-A

N-A

- D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

III. Prisoner Status

Indicate whether you are a prisoner or other confined person as follows (*check all that apply*):

- ☐ Pretrial detainee
- ☐ Civilly committed detainee
- ☐ Immigration detainee
- ☒ Convicted and sentenced state prisoner
- ☐ Convicted and sentenced federal prisoner
- ☐ Other (*explain*) _____

IV. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. If the events giving rise to your claim arose outside an institution, describe where and when they arose.

N-A

- B. If the events giving rise to your claim arose in an institution, describe where and when they arose.

March 31st, 2020 @ 1:30 A.M. At Northeast Ohio Correctional Center
In TPU-1 & 2

- Part D -

(1.)

I have tried to get the prison (Neoc) Cashiers office (Mrs. Miller) to Return a copy of the Acknowledgment of understanding to process my civil lawsuit against the prison (Neoc) The prison is Denying my Rights to legal services by stoping the process of my civil lawsuit. I have filed a complaint with the prison. They know of my lawsuit thats why they are doing this.

(2.)

I was placed in the hole for asking for help telling case manager Gordie I was scared for my safety. I was issued a conduct report and punished for seeking help by given 58 days in the hole and 1 year of commissary Restriction. I did nothing wrong but asked for help.

(3.)

My medical Rights are being violated. I have a lower Back, Lower Range Restriction ~~to~~ to leg issues ordered by Doctor Ritter and they will not honor it out of Spite for me. Due to this I havent showered in weeks. I have asked the nurses to address this issue, no help was given.

March 30th 1:30 a.m. Assaulted by officer Sturgiss & SORT

March 31st 4am spoke with - Hurst, Williams, Spaine, Punn

April 2nd Called Columbus

April 6th & 7th - state troopers Warren off 4th District

April 2nd - Remisnider & Weaver

April 7th Seen by medical for leg told them of lower bunk lower Range Restriction. No help offered still up stairs in TPO-1-119. Still no shower.

April-14th medical for back pain still want Honnor Lower Range, Lower bunk Restriction ordered by Doctor Ritter. Ased for X Rays.

April 20th 2 informals sent to Weaver. No response to informals within 7 days, Spay Kennedy, C/O's not doing Job Kite to Worden 04-06-20 x2

Informal 04-06-20 - Mistreated by C/O's

April 20th, 2020 Denied legal services

C. What date and approximate time did the events giving rise to your claim(s) occur?

March 31st 1:30 am
 March 31st 9 to 12 AM - officer Williams, MR Hurst
 Warren state troopers April 6th and 7th.
 April 3rd - Hemisnider - contract Manager
 March 31st, 2020 @ 1:30 A.M & March 31st, 2020 @ 2:20 P.M
 And still on going to Today's date April 13th 2020

April 2nd - Columbus

D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

I was Kneaded in my face
 Punched in my Rib cage. My fingers were bent backwards & Also my legs.
 I was forced to sleep in a cell for 24 hours with Raw, Dirty, Black
 Sewage water. I was given no cleaning supplies or toilet paper. I was
 Placed into a holding cell (showers) with another inmates puke on the
 floor. Officer Sturgiss and members of S.O.R.T all on SORT Video
 1. S/S-Lawrence 4. S/O - Lambert
 2. C/O - Hainsworth 5. C/O - Skelton
 3. AS/S - Sturgiss
 All of this happened while I (camra -
 was Handcuffed behind my back
 My clothing was cutt from my body.
 legal mail and family pictures thrown in water then lost.

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

My wrists were cutt from the handcuffs being so tight they made me bleed.
 Muscles in my back and leg was pulled. I had many cutts and bruises.
 My Noes was cutt. I asked for xrays on my back
 No medical help for my leg was given for over a week even after my plea
 on SORT Video stating "My leg is broken some thing is wrong"
 At this time no help was given by medical.

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

I want the department of Rehabilitation & Corrections to fire the ones at
 fault and Charges to be filed in the court of law.
 I am asking for \$500,000 in damages & Also for punitive damages.
 I want my safety and security to be seriously addressed by the prison
 and Moved for my safety. I want my Legal mail, Family pictures and letters
 to be Replaced.

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

☒ Yes

☐ No

If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

Northeast Ohio Correctional Center

B. Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?

☒ Yes

☐ No

☐ Do not know

C. Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?

☒ Yes

☐ No

☐ Do not know

If yes, which claim(s)?

All that i've filed in this complaint.

- D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?

☒ Yes

☐ No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

☐ Yes

☐ No

- E. If you did file a grievance:

1. Where did you file the grievance?

Northeast Ohio Correctional Center Youngstown Ohio
4545 Fisher Road, Suite D Columbus Ohio

2. What did you claim in your grievance? G/O's are hazing me for being in the hole for a Rule 23, ask for help for my safety. G/O's told other inmates saying im a cheetah how inmates are threatening to throw urine on me if I take showers. (Havent showered since March 31st)
I fear for my safety and security at NEOCC. I'm in a level 3 prison when i've been classed as A level 2 for 6 months and I shouldnt be around these inmates.

3. What was the result, if any? My Appeals to NEOCC Warden offered no help
Not even my Kite's asking for help.
My Family has called the prison the calls never returned
Columbus was also called.
My informal complaint was not answered within 7 calendar days as stated on the complaint. (Accordance with 5120-9-31)

4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

I've Done All Appeals
Informal Complaint Resolutions
The Prison Kite System.
Family contacted the prison
Involuntar Statement at NEOCC Asking for help.

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

While in TPU and also the compound Grievances System is accessed by SPAY Computer System. In the hole (TPU) they don't allow you to use the computer when asked to file a Grievance.

2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:

SGT. Kennedy, LT Sturgiss, MR Silvernail
 RIB Chairman MRS. Spaine, MR. Clinty
 The Warden, MR Finney, % Davis.
 MR. Hurst % Rippe
 MR Yama
 MR Williams

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

My family filed a police report with the Warren Ohio 44485 Ohio State Troopers 4th District Asking for their help.

(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?

☐ Yes

☒ No

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

N-A

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

☐ Yes

☒ No

B. If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. *(If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)*

1. Parties to the previous lawsuit

Plaintiff(s)

N.A.

Defendant(s)

2. Court *(if federal court, name the district; if state court, name the county and State)*

3. Docket or index number

4. Name of Judge assigned to your case

5. Approximate date of filing lawsuit

6. Is the case still pending?

☐ Yes

☐ No

If no, give the approximate date of disposition.

7. What was the result of the case? *(For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)*

C. Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment? NO.

Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner).

☐ Yes☒ No

D. If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. *(If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)*

1. Parties to the previous lawsuit

Plaintiff(s) N-ADefendant(s) 2. Court *(if federal court, name the district; if state court, name the county and State)*3. Docket or index number 4. Name of Judge assigned to your case 5. Approximate date of filing lawsuit

6. Is the case still pending?

☐ Yes☐ NoIf no, give the approximate date of disposition 7. What was the result of the case? *(For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)*

IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: Joshua Lee Keenan April 13th, 2020

Signature of Plaintiff

Printed Name of Plaintiff

Prison Identification #

Prison Address

Joshua Lee Keenan

Joshua Lee Keenan

AT54057

2240 Hubbard Road

Youngstown
City

OHIO
State

44505
Zip Code

B. For Attorneys

Date of signing:

N/A

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

City

State

Zip Code

Telephone Number

E-mail Address